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Callsign:

FEDERAL COMMUNICATIONS COMMISSION APPLICATION FOR SPACE STATION SPECIAL TEMPORARY AUTHORITY

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APPLICANT INFORMATION

Enter a description of this application to identify it on the main menu:

AMC-5 S2156 STA REQUEST 12-4-2009 to 12-8-2009

1. Applicant

Name: SES Americom, Inc. Phone Number: (202) 478–7137

DBA Name: Fax Number: (202) 478–7101

Street: 2001 L Street, NW E-Mail: daniel.mah@ses.com

Suite 800

City: Washington State: DC

Country: USA Zipcode: 20036 -

Attention: Daniel C.H. Mah

2. Contact										
	Name:	Karis A. Hastings	Phone Nu	umber:	(202) 637–5767					
Company:		Hogan & Hartson L.L.P.	Fax Number:	(202) 637–5910						
	Street:	555 Thirteenth Street, NW	E–Mail:		KAHastings@HHLaw.com					
	City:	Washington	State:		DC					
	Country:	USA	Zipcode:		20004 -1109					
	Attention:		Relations	ship:						
(If your application is related to an application filed with the Commission, enter either the file number or the IB Submission ID of the related application. Please enter only one.) 3. Reference File Number or Submission ID										
If Yes, Gover	, complete and	with this application? attach FCC Form 159. If No, i Noncommercial education n):		for fee exemption (see	47 C.F.R.Section 1.1114).					
4b. Fee Classification CRY – Space Station (Geostationary)										
5. Type Re	equest									
Change Station Location Extend Expiration Date Other										
6. Temporary Orbit Location				7. Requested Extended Expiration Date						

8. Description (If the complete description do	oes not appear in this box	please go to the end of the	he form to view it in i	ts entirety.)							
See Attachment 1.											
9. By checking Yes, the undersigned certifies that neither applicant nor any other party to the application is subject Yes to a denial of Federal benefits that includes FCC benefits pursuant to Section 5301 of the Anti–Drug Act of 1988, 21 U.S.C. Section 862, because of a conviction for possession or distribution of a controlled substance. See 47 CFR 1.2002(b) for the meaning of "party to the application" for these purposes.											
10. Name of Person Signing		11. Title of Person Signing									
Daniel C.H. Mah	Regulatory Counsel										
12. Please supply any need attachments.											
Attachment 1: Attachment 1	Attachment 2:		Attachment 3:								
WILLFUL FALSE STATEMENTS (U.S. Code, Title 18, Sect (U.S. Code, Title 47, Sec		OCATION OF ANY STA	ATION AUTHORIZA	TION							

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